

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Cass County

LCC Name: Partners for a Drug Free Cass County

LCC Contact: Nikki Malott

Address: 1578 N ST Rd 17

City: Logansport

Phone:

Email: nikki@ysainc.org

County Commissioners: Ralph Anderson, James Sailors, Ryan Browing, Brena Pearson

Address: **Cass County Government Building** Room 200 • 200 Court Park

City: Logansport

Zip Code: 46947

Vision Statement

What is your Local Coordinating Council's vision statement?

Bringing people in the community together to provide the best support and resources in an effort to bring greater public awareness to the problems that exist, in our community, related to the abuse of alcohol and other drugs. Working together to create a safer and healthier community.

Mission Statement

What is your Local Coordinating Council's mission statement?

The mission of the Cass County Local Coordinating Council is to identify, coordinate, and facilitate the use of services and available funds in meeting the county's needs in prevention, treatment, and law enforcement as a result of alcohol and drug abuse in Cass County.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Jae Miller	Four County Counseling Center	C	F	Treatment
2	Rick Hollering	Youth Services Alliance	C	M	Prevention
3	Nikki Malott	Youth Services Alliance	C	F	Prevention
4	Kathy Newport	Volunteer	C	F	Prevention
5	Ed Schroder	Cass Co. Sheriff's Department	C	M	Law Enforcement
6	John Rogers	Logansport Police Dept.	C	M	Law Enforcement
7	Will Scott	Cass County Juvenile Probation	C	M	Law Enforcement
8	Steven Snyder	Snyder Counseling/CCADCP	C	M	Prevention/ Treatment
9	Peggy Scott	United Way	C	F	Volunteer
10	Dave Wegner	Cass/ Pulaski Community Corrections	C	M	Law Enforcement
11	Eric Servin	Planning Department	C	F	Volunteer
12	Chuck Newton	Kiwanis Club/volunteer	C	M	Community Member
13	Jerri Brown	Volunteer/LMH	C	F	Community Member
14					
15					

LCC Meeting Schedule:
Please provide the months the LCC meets throughout the year: 2 nd Monday of each month from 12pm-1pm.

Community Needs Assessment: Results

The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

Community Profile

County Name Cass County
County Population Cass County has a population in 2018 is approximately 37,955 people with a median age of 40. Our county has a median household income of \$47,727. With a 13.8 % living in poverty. The population of Cass County identifies as 31,909 non-hispanic and 6,046 Hispanic. A little over 14% of Cass County's population is non-English speaking. 23.1% of it's population is ages 0-17 as of 2018, with 32% of our population ages 18-44. Cass County is a large Rural community, our largest cities in order from largest to smallest are Logansport, Galveston, Walton, Royal Center, and Onward. We are also a large farming community with many corn and bean fields. We have 4 County School Corporations, they are Logansport Community Schools, Lewis Cass School Corporation, and Pioneer School Corporation. Our fourth school corporation is Caston School Corporation, and is right on the Fulton/Cass County line.
Schools in the community Fairview Elementary, Columbia Elementary, Landis Elementary, Franklin Elementary, Columbia 6 th Grade Academy, Logansport Junior High School, Logansport High School, Caston Elementary, Caston Jr/Sr High School, Pioneer Elementary School, Pioneer Jr/Sr High School, Lewis Cass Elementary, Lewis Cass Jr/Sr High School
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Logansport Memorial Hospital, Indiana Health Centers, Express Med, Cass County Health Department, WIC,
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Four County, Sndyer Counseling, Clear Skies Counseling, Comprehensive Counseling,
Service agencies/organizations Area 5, Emmaus Mission, Youth Services Alliance, Cass County Community Foundation, United Way, Salvation Army, Kiwanis, 4 th Dimension Recovery, mulitiple community churches, Family Opportunity Center, CASA, DCS, Cass/Pulaski Community Corrections,
Local media outlets that reach the community Cass County Communications Network, Pharos Tribune, WLHM 102.3, WSAL, WHZR 103.7

<p>What are the substances that are most problematic in your community?</p> <p>We have chose to focus on alcohol, marijuana, and opioids.</p> <p>There is use of other substances, but those three have the greatest affect on our community.</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community</p> <p>Have a Healthy Baby Program, R.O.P.E.S., Snyder Counseling, BSAE Curriculum, New Directions Curriculum</p>

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.¹

Risk Factors	Resources/Assets	Limitations/Gaps
1.Availability of alcohol and other drugs	<ol style="list-style-type: none"> 1. LCC partners work to educate adults on the dangers of making alcohol and other drugs readily available to youth. 2. Sheriff and Police department are helpful with enforcing laws as they pertain to alcohol and other drugs in the community. 	<ol style="list-style-type: none"> 1. Having more key influential members of our community at meetings to help with prevention and treatment. 2. Reaching the “at risk” population to assure proper education as it pertains to durg and alcohol use. 3. Perceived risk of harm is low.

¹Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

	3. LCC uses data collected to prioritize which areas they should focus their efforts.	4. Adult family use of drugs makes availability easier.
2. Family substance use	<ol style="list-style-type: none"> 1. LCC partners to educate families on the risks of substance use in families. 2. LCC works at providing helpful information as it pertains to substance use and treatment. 3. LCC partners provide resources for families with evidence base curriculum. 	<ol style="list-style-type: none"> 1. Reaching the “at risk” population to assure proper education as it pertains to drug and alcohol use in the family 2. Lack of family activities in the community with concentration on healthy living and educating on substance use. 3. Family Conflict is reported high in Cass County.
3. Limited prevention and recovery resources	<ol style="list-style-type: none"> 1. LCC provides funds to supplement programming. 2. LCC looks to partner and add Coalition members in order to maximize its efforts to distribute valuable information/resources. 3. LCC attends community events whenever possible to maintain present and involved in providing information/resources to the community. 	<ol style="list-style-type: none"> 1. Fund availability 2. Lack of events to attend to share information. 3. Limited treatment and prevention options in the county. 4. Community doesn’t understand that SUD is a treatable medical condition and reduce/remove stigma.
Protective Factors	Resources/Assets	Limitations/Gaps
1. Safe, supportive, connected neighborhood	<ol style="list-style-type: none"> 1. LCC partners work with other areas of the community to become more connected and involved. 2. LCC partners work to educate the community on the importance of having a safe, supported connected community. 3. LCC partner shares Developmental Asset messaging throughout the community via social media and other outlets. 	<ol style="list-style-type: none"> 1. Lack of funds 2. Lack of community involvement when opportunities are there to connect and support our community. 3. Lack of pride in the community, in some. Negative influences.

<p>2. Range of opportunities in the community for meaningful youth engagement</p>	<ol style="list-style-type: none"> 1. LCC partner provides, in partnership with the local school corporation, an afterschool program. 2. LCC partners share information on youth engagement opportunities as it becomes available. 3. Many groups in the community that have the ambition and desire to help with youth engagement, should the opportunity for more outreach arise. 	<ol style="list-style-type: none"> 1. Nothing for youth to do, and no where for them to go. 2. Lack of involvement when community partners try to do something for youth/families. 3. Lack of funds
<p>3. Positive youth connection to adults</p>	<ol style="list-style-type: none"> 1. LCC partner shares Developmental Asset messaging through the community via social media and other outlets. 2. LCC encourages and participates in community activities. 3. Promotes and provides resources as it pertains to family involvement and community involvement. 	<ol style="list-style-type: none"> 1. Lack of funds for programming/events. 2. Lack of opportunities for youth and families to connect. 3. Busy schedules and less interactions between youth and families. 4. Lack of healthy active adults to engage with

Making A Community Action Plan

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

Step 1: Create + Categorize Problem Statements

Create problem statements as they relate to each of the identified risk factors.

Risk Factors	Problem Statement(s)
1. Availability of alcohol and other drugs	1. Cass County continues to have a problem with use, misuse and abuse of alcohol. 2. Cass County continues to have a problem with use of marijuana. 3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.
2. Family substance use	1. Cass County continues to have a problem with use, misuse and abuse of alcohol. 2. Cass County continues to have a problem with use of marijuana. 3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.
3. Limited prevention and recovery resources	1. Cass County continues to have a problem with use, misuse and abuse of alcohol. 2. Cass County continues to have a problem with use of marijuana.

	3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.
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Step 2: Evidence-Informed Problem Statements

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

Problem Statements	Data That Establishes Problem	Data Source
1. Cass County continues to have a problem with use, misuse and abuse of alcohol.	<ul style="list-style-type: none"> 46% of cases between Sept 2018- Sept 2019 were directly related to alcohol at Snyder Counseling Services/Cass County Alcohol & Drug Court Program 23% of adult cases seen by Four County Counseling Center (2016) indicate alcohol dependence. 2% of the juvenile cases indicated alcohol misuse. 125 alcohol related arrests were made by the Logansport Police Department (LPD) in 2017. 34% of those arrests were minor consumption charges. There were 141 OWI related arrest in 2017. From January 2019- December 6 2019 there have been 60 Public intoxications, 40 Minor Consumption and 58 for DUI related offenses. 89 alcohol related arrests were made by the Cass County Sheriff's Department. This number is adult only and includes Logansport, Galveston, 	<ul style="list-style-type: none"> Snyder Counseling Four County Counseling LPD CCSD LCC Perception Survey

	<p>Walton and Royal Center (all of which are Cass County). This number does NOT include disorderly conduct. There were 118 OWI related arrests made in 2018. So far up to Sept. 2019 we have had 45 alcohol related arrests and 69 OWI arrests.</p> <ul style="list-style-type: none"> • 20% of those surveyed at our 2019 4H Fair thought that alcohol was the fourth most abused substance in Cass County. The first three perceived substances were Meth, Heroin, and Prescription Drugs. (LCC survey results) • 14% of those surveyed at the 2019 Healthy Kid's Day Event thought that alcohol was the fourth largest abused substance in Cass County. The first three perceived substances were Meth, Heroin, and Prescription Drugs. (LCC survey results) 	
2. Cass County continues to have a problem with use of marijuana.	<ul style="list-style-type: none"> • 13% of the population that participated in the 2019 4H Survey stated that they thought marijuana was the fifth most abused substance in our community. • 14% of the population that participated in the 2019 Healthy Kid's Day survey thought that marijuana was fourth most abused substance in our community. (LCC survey results) 	<ul style="list-style-type: none"> • LCC Perception Survey • Snyder Counseling • Four County Counseling • Family Opportunity Center • LPD • CCSD

	<ul style="list-style-type: none"> • 43 of their case were directly related to Marijuana between Sept 2018-Sept 2019 (which is down from last year), according to Snyder Counseling / CCADCP. • 50% of cases seen by the Cass County Alcohol and Drug Court Program during Sept 2018-Sept 2019 reported that marijuana was a secondary issue for referral. (Snyder Counseling Services) • 11% of cases seen by Four County Counseling Center in 2016 indicate Marijuana use (adults only). * • 139 possession of marijuana charges and 7 dealing charges by the Logansport Police Department (LPD) from January 1, 2019 to December 6, 2019. • 198 Marijuana related arrests were made by the Cass County Sheriff's Department in 2018, 10 of those arrests were minors. • 14 juveniles were put on probation for a marijuana related arrest in 2017. (Family Opportunity Center) 	
3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.	<ul style="list-style-type: none"> • 37% on the 2019 Healthy Kid's Day survey reported that heroin and prescription drugs were believed to be the second and third most abused substance in our community. 38% on the 2019 4 H Fair survey reported that heroin and prescription drugs were believed to be the second and third most used abused 	<ul style="list-style-type: none"> • LCC Perception Survey • Family Opportunity Center • Cass County Coroner • CCSD • CHNA Report

	<p>substance in our community (LCC survey results)</p> <ul style="list-style-type: none"> • There were 38 drug related offense referred to the Family Opportunity Center in 2018. (Family Opportunity Center) • According to the County Profiles Opioid Use and Related Outcomes published by the Indiana State Department of Health Cass County has 23 non-fatal ER visits involving opioids (per reporting) In 2017, 25.9% of people seeking treatment reported either prescription opioid use or heroin use. • There continues to be a rise in Opioid related deaths, in 2018 there was a reported 11 overdose deaths in Cass County due to Opioids or meth. (Cass County Coroner) • There were 120 controlled substance arrests and 16 syringe arrests in 2018. Thus far in 2019 there are 98 controlled substance arrests and 17 syringe arrests according to the Sherriff's Department. • According to 2019 Community Health Needs Assessment Report CHNA for Cass County, 36.5% of survey respondents indicate that their lives have been negatively affected by substance abuse, including 3.3% who reported "illicit drug use" in the past month. 	
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	<ul style="list-style-type: none"> According to 2016 CHNA key informants (who rated this as a “major problem”) clearly identified methamphetamine/ other amphetamines and heroin/other opioids as the most problematic substances abused in the community, followed by alcohol and prescription medications. 	
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Step 3: Brainstorm

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

Problem Statements	What can be done (action)?
1.Cass County continues to have a problem with use, misuse and abuse of alcohol.	<p>1. To decrease the amount of adult arrests by 3% in the next three years.</p> <p>2. To increase awareness of risk to both juvenile and adult population by 3% in the next three years as indicated by annual surveys conducted by the LCC.</p> <p>3. To have cooperation from each of the local school corporations with LCC members and organizations; to allow implementation for alcohol and drug awareness education.</p>
2.Cass County continues to have a problem with use of marijuana.	<p>1. Increase family/parent education on marijuana use.</p> <p>2. Sustain the number of treatment and prevention services focusing on marijuana and its affects.</p> <p>3. Increase family/parent education on marijuana use.</p>

3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.	<p>1. Sustain the number of treatment and prevention services focusing on opioid abuse and misuse.</p> <p>2. Increase family/parent education on prescription drug safety, through educating on locking meds and RX days that may be available in community.</p> <p>3. Collect and track data for Cass County as it becomes more available.</p>
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Step 4: Develop SMART Goal Statements

For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

Problem Statement #1
<p>Goal 1 Support evidence-based programming with a focus on risks of alcohol and other drug use and abuse in order to lower the monthly use percent by .25% in a year.</p>
<p>Goal 2 To increase awareness of risk to both juvenile and adult population by 3% in the next three years as indicated by annual surveys conducted by the LCC.</p>
Problem Statement #2
<p>Goal 1 Sustain the number of treatment and prevention services focusing on marijuana and its affects. See results reflected on LCC Survey each year.</p>
<p>Goal 2 Provide educational presence and continue annual survey throughout our community. Positive</p>
Problem Statement #3
<p>Goal 1 Collect and track data for Cass County as it becomes more available. Request data and adjust goals as needed.</p>
<p>Goal 2 Participate/ become available for school programs such as S.A.D.D. groups of local high schools and participate in school programming for elementary school. Increase or maintain school participation each year.</p>

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 Support evidence-based programming with a focus on risks of alcohol and other drug use and abuse.	<ol style="list-style-type: none">1. Supplement funding for organizations to provide programming.2. Continue communicating/partnering with organizations that provide evidence-based programming.3. Explore new ways to provide evidence-based programming.
Goal 2 To increase awareness of risk to both juvenile and adult population by 3% in the next three years as indicated by annual surveys conducted by the LCC.	<ol style="list-style-type: none">1. Supporting/partnering with organizations to provide programming to educate on the risks of alcohol use.2. Participate in local events to provide resources to the community.3. Work within schools to educate students on the risk alcohol use has on them.
Problem Statement #2	Steps
Goal 1 Sustain the number of treatment and prevention services focusing on marijuana and its affects.	<ol style="list-style-type: none">1. Help provide funds for translated services for treatment and prevention services2. Provide funds or supplement funds for prevention programming.3. Participate in local events and provide resources and information on prevention and treatment.
Goal 2 Provide educational presence and continue annual survey throughout our community.	<ol style="list-style-type: none">1. Partner with schools to provide them resources.2. Examine our LCC Survey yearly to update or change requested information to follow our communities needs.

	<ol style="list-style-type: none"> 3. Participate in local events and provide resources and information.
Problem Statement #3	Steps
<p>Goal 1</p> <p>Collect and track data for Cass County as it becomes more available.</p>	<ol style="list-style-type: none"> 1. Check with local entities for new or updated data. 2. Keep updated on new and updated data that is provided via the web. 3. Provide data to our community as we collect it.
<p>Goal 2</p> <p>Participate/ become available for school programs such as S.A.D.D. groups of local high schools and participate in school programming for elementary school.</p>	<ol style="list-style-type: none"> 1. Actively communicate/Partner with schools to bring much needed resources. 2. Support local organizations that are providing programming in schools. 3. Join already existing efforts in the schools by providing resources for distribution.

Fund Document

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

Funding Profile

Amount of funds deposited into the County Drug Free Community Fund from fees collected last year (\$100.00): <u>\$34,121.39</u>		
Amount of unused funds that rolled over from the previous year (\$100.00): <u>\$7,972.82</u>		
Total funds available for programs and administrative costs for the upcoming year (\$100.00): <u>\$42,094.21</u>		
Amount of funds granted the year prior (\$100.00): <u>\$44,602.47</u>		
How much money is received from the following entities (if no money is received, please enter \$0.00):0.00		
Substance Abuse and Mental Health Services Administration (SAMHSA):0.00		
Bureau of Justice Administration (BJA):0.00		
Office of National Drug Control Policy (ONDCP):0.00		
Indiana State Department of Health (ISDH):0.00		
Indiana Department of Education (DOE):0.00		
Indiana Division of Mental Health and Addiction (DMHA):0.00		
Indiana Family and Social Services Administration (FSSA):0.00		
Local entities:0.00		
Other:		
Funding allotted to prevention/education; intervention/treatment; and criminal justice services and activities (\$100.00):		
Prevention/Education: <u>\$10,523.56</u>	Intervention/Treatment: <u>\$10,523.56</u>	Justice: <u>\$10,523.56</u>
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator Salary		7,200
Office Supplies		700
Red Ribbon Breakfast		1,500
Event Funds		1,123.53
Funding allotted by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$4,646.38	Goal 1: \$2,235	Goal 1: \$6,896.38
Goal 2: \$5,104.71	Goal 2: \$8,571.38	Goal 2: \$1,494.71